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Director of Health

## Director's Report for Health Commission Meeting of January 4, 2011

*A current overview of issues affecting the state of public health in San Francisco*

<http://www.sfdph.org/dph/comupg/aboutdph/insideDept/dirRpts/default.asp>

### Budget Update

On December 21, the Department submitted its plan to reduce current year use of General Fund by 2.5%, which translates to an \$8.7M reduction in General Fund. Because the Department is projected to be overspent by \$9.8M, the reduction necessary to meet our target increased to \$18.5M.

The Department's plan which is comprised entirely of revenue increases, totals \$20M and exceeds the \$18.5M target. After covering the \$9.8M net overspending, the General Fund decrease is \$10.2M.

Following are the components of the Plan:

SFGH MediCal 1115 Waiver increase	\$26.0M
SFGH projected loss of Hospital Fee for Jan-June 2011	( 13.0M)
LLH increase in MediCal SNF per diem rate	<u>7.0M</u>
Total	\$20.0M
Less net deficit from first quarter report	<u>(9.8M)</u>
General Fund reduction	\$10.2M

Revenues from the 1115 Waiver and the SNF rate are continuing revenues that will increase our baseline budgeted revenue for 2011-12.

Our remaining base budget target for 2011-12 is \$24.6M, plus an additional \$34.8M contingency plan.

### New Health Officer

Pending official approval by the Board of Supervisors, I am pleased to announce that Tomás Aragón, MD, is the new Health Officer and Director of Population Health and Prevention (PHP; formerly Community Health & Safety). As the Health Officer, Dr. Aragón is authorized to exercise the police powers of the state to protect health and prevent the spread of diseases. He is charged with enforcing local health orders and ordinances, the orders and rules prescribed by the California Department of Public Health, and the statutes related to public health. As Director of PHP, he will direct and coordinate services in communicable disease control, environmental health, chronic disease and injury prevention, health promotion, public health laboratory, and disaster preparedness. He is trained in primary care internal medicine (SFGH), clinical infectious diseases (UCSF), HIV/AIDS research fellowship (UCSF), and epidemiology (DrPH, UC Berkeley School of Public Health). He holds a faculty appointment at UC Berkeley SPH.

I know the Commissioners join me in welcoming Dr. Aragón to this new position and the exciting opportunities and challenges that lie ahead.

### **Anne Kronenberg, Deputy Director of Health, Takes over Lead of DEM**

One of Mayor Newsom's last official appointments before he left office was to appoint Anne Kronenberg, *Deputy Director of Health*, as the *Executive Director of the San Francisco Department of Emergency Management (DEM)* beginning January 1, 2011. As a long time friend and colleague of Ms. Kronenberg, I have had the privilege of working closely with her on many public health projects, programs and initiatives and know her to be a talented, compassionate and capable administrator. I know the Commissioners join me in congratulating Ms. Kronenberg and thank her for her 16-year commitment to public health and wish her well as she assumes her duties at DEM. My staff and I look forward to continuing to work with her in her new capacity.

### **Interim Appointments**

I have asked Marc Trotz to serve as Interim Director of Community Programs and Colleen Chawla to be Interim Director of Policy & Planning. I thank them for their willingness to serve in these important leadership roles during this transition period.

### **Susan Fernyak, MD Wins MFAC Award**

Congratulations to **Susan Fernyak, MD**, *Director, Communicable Disease Control & Prevention*, who has been selected as one of the recipients of the prestigious Municipal Fiscal Advisory Committee (MFAC) Good Government Awards. The 31<sup>st</sup> Award Night will take place in City Hall on Monday, March 21, 2011 at 6:30 p.m. This event has evolved over the last three decades, but its purpose remains the same: **to recognize and acknowledge exemplary job performance and leadership by San Francisco City employees.** I am pleased to note that a DPH employee has been among the recipients of this award every year for the past 15 years.

### **Federal Health Care Reform Team Visits SFGH**

San Francisco General Hospital (SFGH) hosted a December visit by Dr. Don Berwick, the new *Administrator of the Federal Centers for Medicare and Medicaid Services*. Dr. Berwick and a number of prominent health care reform officials toured SFGH with a particular interest in learning about new programs and innovations that have improved patient care and expanded access with limited resources.

The General Medicine Clinic explained how eReferral has helped streamline access to specialty care by cutting cut wait times, dispensing with unnecessary appointments and moving urgent ones to the front of the queue. The group also was given a demonstration on Video Conferencing Medical Interpretation (VMI) for getting real time, qualified interpreters for patients who do not speak English. VMI has allowed us to double the number of daily interpretations at SFGH to 300 in 20 languages. In the Acute Care for Elders (ACE) unit, clinicians described key features of ACE that puts a multi-disciplinary team to work for every patient, every day, with the goal of getting them home and healthy. The SHHE (Support from Hospital to Home for the Elderly) team helps reduce readmissions by tracking elderly patients after discharge and phoning them on the second and 30th day to see how they're doing, answer questions and help solve problems that may be interfering with their health. Finally, they were introduced to the palliative care team, a consultative service assigned anywhere in the hospital where a patient needs them.

I am very grateful to the outstanding efforts of our creative and dedicated staff who are always looking for better ways to deliver excellent care with limited resources. It is my hope that Dr. Berwick and his guests will be inspired by what he witnessed at SFGH and use these ideas as models for improving health care during this early health care reform period.

### **State Approves New Methadone Dispensing Site**

I am very pleased to report that the State Department of Alcohol and Drug Programs recently approved the Community Behavioral Health Services (CBHS) Pharmacy at 1380 Howard St. to become a methadone dispensing site for San Francisco's Office- Based Opiate Treatment (OBOT) program.

The OBOT methadone treatment program has been in operation for more than seven years, serving patients enrolled primarily through Tom Waddell Health Center, Potrero Hill Health Center and BAART/Hyde Street OBOT clinic. Until now, all patients received medication services solely through the San Francisco General Hospital Pharmacy. The pharmacy component of OBOT is one of its most successful features, with patients citing positive interactions with their pharmacist as a key motivation for treatment participation. Pharmacists also report appreciating the opportunity to work directly with clients and witness dramatic improvement with client success.

The CBHS Pharmacy at 1380 Howard St. has been successfully providing opiate treatment with buprenorphine to individuals recovering from opiate dependence since 2003. More than 600 patients have received treatment through the pharmacy in collaboration with Primary Care, Mental Health and Substance Abuse physicians and medical staff across 20 DPH and contractor clinic sites.

The State approval creates a second site for patients to receive medication assisted treatment with methadone. I congratulate the CBHS Pharmacy on the success of this application and thank them for the hard work they have done to secure this approval.

### **SF FIRST/Homeless Outreach Team: Art Corner**

As the Commissioners know, DPH prides itself in working with other agencies and community groups to solve problems in new and creative ways. I wanted to share with the Commission a brief story about a small project that has just begun here in the Civic Center area.

Recently, the Main Branch of the Public Library approached DPH with a concern: on its periphery, a collection of individuals who appear homeless has been gathering at the corner of Fulton & Larkin Streets. The area is a busy one, serving as a photo stop for tourist buses, a popular route for foot and commuter traffic and is especially busy on afternoons and evenings when the performing arts buildings and City Hall are open. The Library staff wondered, "Can the SF FIRST / Homeless Outreach Team help improve the activities of this corner?"

SF FIRST had already targeted this location and had helped a number of individuals who frequented the corner. The team also realized that many of the individuals who congregate in this area are individuals with stable housing who use the location to meet their friends, to hang out and, not infrequently, consume alcohol/drugs. Very quickly, the team realized it would have to try something different to engage this crowd.

And so on a Friday afternoon, with the help and advice of a former client--who is also a street artist--SF FIRST set out with a canopy, a red carpet and some easels and pastels. And, just for fun, they donned red berets. As the conventional wisdom goes, "They built it and the people came." Tourists, artists, homeless individuals and curious passersby stopped, asked questions, and some, as intended, picked up pastels and began creating art.

The result was a collection of interesting artwork—much of which was donated—a very happy and engaged group of unlikely participants, a work-training experience for the team's former client and a different look for this street corner for three hours on a Friday afternoon.

Initially, SF FIRST plans on running "Art Corner" at Fulton & Larkin every first Friday of the month. When the weather improves, there is a possibility of extending it to a weekly event. The team plans on building on this initial success by combining it with an increased homeless outreach presence during the event, and by inviting its own current clients to try a healthy, expressive activity in the hopes of expanding their recreational repertoire. A special thanks to Rajesh Parekh, MD, who took the lead on this activity, and to everyone who contributed ideas and time to get this program up and running. I will continue to update the Commissioners on the progress of the Art Corner project as it evolves.

#### **[attachments] December Pertussis Clinics Target Latinos**

The San Francisco Immunization Coalition worked with DPH, San Francisco State University, Mission Head Start, SF Unified School District, Mission Neighborhood Health Center, and Good Samaritan Family Resource Center to hold Tdap (adult/adolescent whooping cough booster vaccine) clinics in San Francisco's Mission District in December.

According to the most recent statistics, the burden of whooping cough throughout the State of CA has fallen on Latinos in terms of numbers of cases and deaths. We want to make sure San Franciscans are protected, especially children under the age of one for whom pertussis complications are the most serious.

The clinics were free and open to the public but targeted to family members and caregivers who are in contact with a young child. A copy of the flyer in English and Spanish is attached.

#### **Update of Grant for Enhanced Comprehensive HIV Prevention Plan (ECHPP)**

The purpose of the ECHPP one-year grant is to help local health departments to begin implementing the National HIV/AIDS Strategy. A short-term, intensive planning process ending in early February will be followed by implementation of some of the priorities identified in the Plan.

The HIV Prevention Section (HPS) has convened a Steering Committee to develop the ECHPP Plan with representatives from HIV Health Services, Community-Oriented Primary Care, STD Prevention & Control, and HIV Epidemiology. The Plan will consist of two main parts: 1) an inventory of the continuum of services for people living with and at risk for HIV, and 2) goals, objectives, and strategies for the future with regard to 14 required and 10 recommended activities listed in the grant. Examples of activities are: routine opt-out HIV screening in clinical settings, community-based HIV testing, partner services, and linkage to care. The Steering Committee will get feedback and endorsement from the HIV Prevention Planning Council and the HIV Health Services Planning Council. Anyone with questions about the Steering Committee and its activities can contact Dara Geckeler at [dara.geckeler@sfdph.org](mailto:dara.geckeler@sfdph.org).

### State Tobacco Control Program Releases New Smoking Data

On December 20, the California Tobacco Control Program released new smoking prevalence data for the state as well as counties. Statewide, smoking declined 33.8% from 20.1% in 1990 to 14.2% in 2008 while in San Francisco smoking declined by 31.4% from 19.7% in 1990 to 13.5% in 2008.

Smoking prevalence	1990	2008	% Change
San Francisco	19.7%	13.5%	-31.4%
<b>California</b>	<b>20.1%</b>	<b>13.3%</b>	<b>-33.8%</b>

Smoking prevalence continues to vary across ethnic populations. For example, smoking among Asians declined from 13.9% in 1990 to 8.1% in 2008, while among Asian men, it declined from 21.3% to 12.8%. Among African Americans, smoking declined from 24.1% to 14.2% and among Hispanics from 17.2% to 10.2%. While smoking prevalence for the LGBT population is only available for 2004, it is important to note that the 2004 state survey found that 30% of lesbian, gay, bisexual and transgender people smoke, more than twice the California average. Counties with larger cities tended to have lower rates while rural counties tended to have higher rates. San Francisco however did not follow the trend for urban vs. rural.

Several media channels covered this story, including KCBS, KGO radio, *San Francisco Chronicle*, *Examiner*, *Bay City News*, and the *Bay Citizen*. The reporters consistently wanted to know why San Francisco had a higher smoking rate than neighboring counties. While there is breakdown of San Francisco smoking prevalence data by ethnicity, sexual identity or other variables, a number of tobacco control professionals in San Francisco have speculated as to some possible factors.

- One factor could be the “permissive” reputation of San Francisco, exemplified by policies such as the lowest priority given to enforcement of marijuana laws.
- The bar and nightclub culture of San Francisco has also been exploited heavily by the tobacco companies.
- Tobacco companies have heavily targeted gay men and lesbians through advertising as well as the bar scene, portraying cigarettes as a good way of meeting people. The significant LGBT population in San Francisco, which has the highest smoking rate of any other group, could be a contributing factor to San Francisco’s smoking rate.
- 50% of the city’s population falls into the 25-44 age group, which statewide has the highest rate of smoking among all age groups.
- San Francisco also has a relatively small population of children and many parents don’t want their children exposed to second hand smoke and will quit as they become parents.
- Finally, the high density of tobacco retailers in San Francisco could also be a contributing factor as research has linked high density of tobacco outlets to higher rates of smoking. There are over 1,000 tobacco outlets in the City with 14.1 outlets per 10,000 residents. The ubiquitous presence of tobacco, particularly in low income neighborhoods with large populations of people of color such as the Tenderloin and Mission, sends a message that normalizes tobacco use while putting that community at more risk for tobacco related health disparities due to higher smoking rates.

### Food Security Task Force Releases Annual Report

The San Francisco Food Security Task (FSTF) released its annual report for 2010. Highlights include:

- San Francisco's Food Stamp program now offers an online application process and has seen a fourfold increase in applications in recent months and a 60% increase in the number of food stamp households with children;
- Since 2008, San Francisco's free meal programs have increased the number of meals they serve on a daily basis – some by over 22%;
- A public/private partnership has implemented a successful free grocery delivery program for homebound seniors;
- Alemany Farmers Market offers an incentive program to increase food stamp recipients' ability to purchase fresh produce from local farmers.

The report presents the case that because of the high cost of living in San Francisco, federal poverty guidelines do not accurately demonstrate need. Because of this, many residents who earn too much to receive federal benefits nevertheless need food assistance. The report also notes the growing demand for all food and nutrition programs. For example, the need for home delivered meals for seniors and the disabled continues to exceed allotted funds.

The Food Security Task Force (FSTF) was established by the San Francisco Board of Supervisors and charged with the responsibility of advising the Board of Supervisors on funding priorities, legislative action, and city policies to address hunger and enhance food security. The group tracks vital data regarding hunger and food security in San Francisco, including the utilization and demand for federal nutrition programs and community based meal programs. It is staffed by the Department of Public Health's Environmental Health division.

The FSTF report is available online at: [www.sffood.org](http://www.sffood.org). For more information, contact Paula Jones, [paula.jones@sfdph.org](mailto:paula.jones@sfdph.org).

### **Syphilis Rates Continue to Rise in SF**

After a year of decline, early syphilis rates in San Francisco are rebounding. Between January and September of 2010, 460 early syphilis cases were reported, a 21.7% increase over the same period in 2009. Over 90% of early syphilis cases were among MSM and over 1/3 had a previous syphilis diagnosis. Consistent with previous years, 58% of the early syphilis cases were white, 20% Hispanic, 10% African American and 6% Asian/PI. Over half of the cases were over the age of 40 and 60% were HIV infected. Nearly 1/3 of early syphilis cases reported using methamphetamines and over 1/4 reported using erectile dysfunction medication in the past year. Nearly half of reported cases had met sex partners on the Internet.

### **STD411 – Mobile App for Measuring Risky Behavior**

The STD Prevention and Control Services Section released its first mobile iPhone "app" specifically geared for gay, bi and trans-men and other men who have sex with men (MSM). The app, called *STD411*, offers a new opportunity for users to explore the connections between sexual activities, risk and sexual health. *STD411* was designed as an easy-to-use interactive application for the Apple family of products – iPhone, iPad and iTouch – and is downloadable free of charge via [www.iTunes.com](http://www.iTunes.com). *STD411* also provides links to more information and resources via the national-model website, [www.SFCityClinic.org](http://www.SFCityClinic.org). Using visual cues represented by flashing "condom" images, the user can evaluate the risk for STDs associated with a wide range of sexual activities. This free app does not ask for any user information or registration for use.

For more information about **STD411**, visit the app store in iTunes or email [iSTD@sfdph.org](mailto:iSTD@sfdph.org).

### **Go Folic! Women's Nutrition Project**

Throughout January, the DPH Go Folic! Women's Nutrition Project will celebrate National Folic Acid Awareness Week (Jan 4-10) by reaching out to young women at San Francisco Farmer's Markets about the importance of folic acid in their diet and the role it plays in having healthy babies. Staff will be at the Mission Community Market on Thursdays, and the Alemany and Fillmore Farmer's Markets on Saturdays.

Folic acid is not just for women planning a pregnancy. Fifty percent of pregnancies are unplanned, and, taken as part of a multi-vitamin formula, folic acid has additional health and beauty benefits. Go Folic! has streamlined the process of vitamin distribution at DPH Clinics and a program is currently in place that provides women clients with a year's supply of free multivitamins. For more information, contact Shivaun Nestor, [shivaun.nestor@sfdph.org](mailto:shivaun.nestor@sfdph.org). The Go Folic! Website is at [www.gofolic.org](http://www.gofolic.org).

### **Project Homeless Connect**

As expected, the December 9<sup>th</sup> Project Homeless Connect event at Bill Graham Civic Auditorium was extraordinarily busy and a reminder of how many people continue to be in need of services. 1735 people experiencing homelessness were served by **931** volunteers. Medical-related highlights:

<b>81</b>	<b>DENTAL</b>
<b>92</b>	<b>FLU SHOTS</b>
<b>100</b>	<b>HIV TESTS</b>
<b>627</b>	<b>GLASSES &amp; 70 EYE EXAMS</b>
<b>165</b>	<b>MEDICAL and 42 FOLLOW UP APPTS</b>
<b>92</b>	<b>NEEDLE EXCHANGE</b>
<b>11</b>	<b>SUBSTANCE ABUSE, MENTAL HEALTH &amp; METHADONE TREATMENT</b>
<b>90</b>	<b>PODIATRY</b>
<b>12</b>	<b>WHEELCHAIR REPAIRS</b>
<b>47</b>	<b>SHELTER, STABILIZATION, or HOMEWARD BOUND</b>
<b>150</b>	<b>ALTERNATIVE THERAPIES</b>

Judith Klain, who has directed the Department's efforts for this project since its inception, has decided to return to her duties as a Health Planner. Please join me in welcoming Kara Zordel, who will take over managing Project Homeless Connect beginning in January, 2011. Many thanks to Judith for her commitment and hard work with PHC that helped make it a success and a national model for many other jurisdictions throughout the US.

### **Forensic AIDS Project Services Coordinator to Present at Leadership Summit**

Isela Gonzalez, Forensic AIDS Project (FAP) Prevention Services Coordinator, was selected to speak at the opening plenary session of the national HIV Prevention Leadership Services conference held in Washington DC in mid-December. The subject of the opening plenary was an overview of HIV Prevention Leadership Services and of CDC expectations for grantees. Ms. Gonzalez talked about the community planning process and what is needed in to take the next steps in HIV prevention planning. The annual summit offers AIDS directors, program managers, executive directors, HIV prevention program staff, CPG members and other HIV prevention partners a forum to exchange information about HIV prevention services and how to improve them.

**Unsung Hero Award**

Karen Pierce has received an "Unsung Hero" award for her work with the Bayview Hunters Point Health and Environmental Assessment Task Force from the Anthem Blue Cross San Francisco Community Advisory Committee in early December. The Unsung Hero award was established to provide recognition of the importance of community leaders who work to create, in different and unique ways, healthier, more equitable programs and communities. Karen is a DPH Health Program Coordinator working jointly with the Community Health Promotion and Prevention and Contract Development and Technical Assistance sections.